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6. \_\_\_ Microfiche Computer Program (Appendix)

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	Attorney Docket Number:	Total Pages:
UTILITY	P051	2
PATENT APPLICATION	First Named Inventor or Apple	cation Identifier:
TRANSMITTAL	Andrews et al.	
	Title:	
(Only for new non-provisional applications under 37 CFR 153(b))	Fabrication of Optical Devices and	
	Assemblies	
I	Express Mail Label No	
i	ET529683401US	
APPLICATION ELEMENTS	ADDICAGO TO:	ioner for Patents
See MPEP chapter 600 concerning utility patent application contents.		nt Application ton, D.C. 20231

PTO/SB/05 (4/98)

See MPEP chapter 600 concerning utility patent application contents.	Washington, D.C. 20231
<ol> <li>Fee Transmittal Form, (see below)</li> <li>X Specification: Total Pages: 38</li> <li>X Drawing(s)(35 U.S.C. 113): Total Sheets: 11</li> <li>Oath or Declaration: Total pages:         <ol> <li>Newly executed (original or copy).</li> </ol> </li> <li>b. Copy from a prior application (38 CFR 1.63(d)) (for continuation/divisional with Box 16 completed)         <ol> <li>Deletion of Inventor(s). Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li> <li>Unsigned.</li> </ol> </li> <li>Incorporation by Reference [useable if Box 4b is checked]. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered</li> </ol>	7 Assignment papers (cover sheet & document(s))  8 CFR 3.73(b) Statement (when there is an assignee Power of Attorney  9 English Translation Document (if applicable)  10 Information Disclosure Statement.     Copies of IDS citations  11 Preliminary Amendment  12. X Return Receipt Postcard. (MPEP 503) (should be specifically itemized.)  13 Small Entity Statement(s).  14 Certified Copy of Priority Document(s) (if foreig priority is claimed.)  15 Non Publication Request under 35 USC 122(b)(2)(B)(i)  16 Other:
declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference	

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By: Kottiteen Scheinber

Kathleen Scheinberg

Attorney Docket No.: P051

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16. If a Continuing Application: (check appropriate box and	d supply the requisite information:		
Continuation Divisional Contin	Continuation-in-part of prior application No.:		
Prior application Information: Examiner Group/Art Unit			
Correspondence Address:			
X Customer Number or Bar Code Label:	Correspondence Address: Michael O. Scheinberg P.O. Box 164140 Austin, TX 78716-4140		
25784	Telephone: (512) 347-1276 Facsimile: (512) 603-1963		
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FILING FEE CALCULATION FORM					
Entity	Basic Filing Fee	Each Independent Claim in Excess of 3	Each Claim in Excess of 20	Multiple Dependent Claim Fee	Total
Small	\$355	x \$40=	x \$9 =	x \$135=	
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Date: 9/17/01

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